

## Application Data Sheet

### Application Information

Application number::	NOT YET ASSIGNED
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	Paper
Computer Readable Form (CRF)?::	No
Title::	SYSTEM AND METHOD OF INTEGRATING LOYALTY/ REWARD PROGRAMS WITH PAYMENT IDENTIFICATION SYSTEMS
Attorney Docket Number::	65003-P001US-10308058
Request for Early Publication?::	No
Request for Non-Publication?::	YES
Small Entity?::	YES
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	INDIA
Status::	Full Capacity
Given Name::	Ajay R.
Family Name::	Bam
City of Residence::	Belmont
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	13 Worcester Street
City of mailing address::	Belmont
State or Province of mailing address::	MA
Postal or Zip Code of mailing address::	02478

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Robert J.  
Family Name:: Wesley  
City of Residence:: Wellesley  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 6 Benvenue Street  
City of mailing address:: Wellesley  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02482

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Walter  
Family Name:: Stock  
City of Residence:: Newton  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 22 Greenough Street  
City of mailing address:: Newton  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02465

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Troy  
Family Name:: Chen  
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State or Province of Residence:: NJ  
Country of Residence:: US  
Street of mailing address:: 69 Sussex Street, Apt. #1  
City of mailing address:: Jersey City  
State or Province of mailing address:: NJ  
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**Correspondence Information**

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**Representative Information**

Representative Customer Number:: 000029053